

LOUISVILLE MEDICAL NEWS.

"*NEC TENUI PENNA.*"

Vol. I.

LOUISVILLE, MARCH 11, 1876.

No. 11.

EXPLOSION OF THE PHENOMENON'S TUG.

Not the least curious feature about the Louisville-Kentucky School of Medicine is the relation it bears to the American Medical Weekly. Whether the journal exists for the school or the school for the journal is not well made out. We rather incline to the opinion that its faculty will one day wake up to the fact that its labors are principally to keep that ill-ballasted craft afloat, and that they should appoint a guardian in the premises. The rage of the American Medical Weekly, which for the last two months has been prudently restrained perhaps by the saner influences to which we have referred, has at last burst forth. A few puffs and growls have from time to time indicated the wrath which was accumulating, but on Saturday last safety valves and boilers were shivered into atoms. Such a gush of billingsgate as ensued has never been heard since men fed on fish. "Abortion," "coarseness," "impudence," "stench in the medical nostrils," "noisy ass," "Hottentot," etc., were some of the milder epithets with which the air was filled. "Hypothenuse" and "paralelogram" were nowhere. "Planisphere" and "the temple of Dinderah" came hurtling out of the seething cauldron. And all these against the noble breast of the LOUISVILLE MEDICAL NEWS for its inveterate habit of telling the truth! We surrender at once all pretensions to cope with our adversary in its chosen field. We would not if we could follow its half-educated ravings. Nor is our soul in the least ruffled; it is simply sorrowful at such display of temper.

Perhaps by the time that this is in print the American Medical Weekly will enjoy a

more lucid interval, and as it is fond of trite quotations it may remember to its profit the remark of Mr. Pitt to the effect that "the limited talents of some men preclude the possibility of their being severe without being unparliamentary."

In a quarrel so just as ours we can afford to be magnanimous. The American Medical Weekly can not excite us to enmity against itself nor the faculty of the school it represents. We wish them personally every success. We would not turn a single dollar from its course toward their pockets. We well know that since the facilities for making doctors has been so increased that of the profession it may be said, as an astute historian remarked of the inhabitants of Borneo, "they do live principally upon what they can get." Hence these "Kentucky tears." But private interests must yield to the public good. The policy of the Louisville-Kentucky school will not stand the light of day. Unfortunately for good feeling a part of our mission is to let in a full flood of this commodity upon it. This is our present work, and we can swerve from it a moment only to correct

SOME OF THE ERRORS

about other matters into which the American Medical Weekly has fallen in its last issue. We could not reach them all. The journal itself is a great mistake. We would suggest that its proper field is neither medicine nor medical politics. Scaring children would be admirably suited to its powers. But to some of the errors in question.

It is the Louisville-Kentucky School which is on trial for its life, not the University. We have accused the Phenomenon of such practices as have never been heard of before in

the history of medical teaching. The prosecution has introduced witnesses, and is ready with others if the court is not already satisfied. It is no offset to these to prove that the University or any other institution is black as Erebus. If what the Weekly says be true, all the greater is the necessity for a commission of inquiry to visit the city of Louisville.

As to the "numerical decadence" of the "alarmed" University, how does the list of one hundred and twelve graduates which formed its last graduating class compare with the eighty-six reported by the Louisville-Kentucky School? We hear much of the largest classes in the West which have been caught by the Phenomenon's drag-net, but to the great credit of the intelligence of the American youth they do not so exhibit.

The wanton accusation against the dean of the University would not stand in this community against his simple word, even if he did not possess, as his wild accuser might know, the written evidence of its falsity.

Lastly, we acknowledge our "castigation." We feel that the American Medical Weekly "has drawn us down with its nose firmly inserted between our teeth and its hair securely wrapped around our hands." It should be merciful!

It will be time enough when the University of Louisville needs a champion to select one to act in that capacity. Allow us mildly to remind the oblivious Medical Weekly that "the facts" in regard to this institution, which "have long been known to the writer, but out of consideration for American medical colleges have been until now withheld," have formed the staple of its editor's journalism for the last seven years, and that in every contest regarding these statements he has been worsted. We have no ambition to tilt against the headless trunk left by Prof. Bell. The University can take care of itself. Let us return to our proper mutton.

The Louisville-Kentucky Announcement declares that "*any chartered medical institution will justly forfeit the respect, confidence,*

and support of the profession if it gives two graduating courses in one year." Then why does it do so? "Because they are separate and distinct institutions." Here are the

TWO DISTINCT INSTITUTIONS.

LOUISVILLE MED. COLLEGE. KY. SCHOOL OF MEDICINE.

Terms begin Oct. 1st and end last of Feb'y.

Terms begin March 1st and end in June.

H. M. Bullitt,
J. A. Ochterlony,
John Goodman,
J. A. Ireland,
J. M. Keller,
J. W. Maxwell,
C. W. Kelly,
A. B. Cook,
C. W. Wright,
Geo. T. Cook,
E. S. Gaillard, *Dean.*

H. M. Bullitt,
J. A. Ochterlony,
John Goodman,
J. A. Ireland,
J. M. Keller,
C. W. Kelly,
A. B. Cook,
C. W. Wright,
Geo. T. Cook,
E. S. Gaillard, *Dean.*

Same building, same wax-model, mannikin, etc.

Will any one please turn around twice and say which is which? There is in the Middle States a bird which during the winter is called the Ortolan; changing its plumage somewhat in the spring, it is then known as the Bob-o'-link. This school has not the claim of this bird to two separate names, for it does not even change its plumage. The Weekly is fond of names; let us call its winter brood Ortolans and its spring-chickens Bob-o'-links. We like to be distinctive.

The Weekly says that for "partisan purposes" we have failed to note the existence of spring graduating courses elsewhere than in Louisville. The civilized world has no such phenomenon as the Louisville-Kentucky School.

"EVERY MAN BEAT HIS MAN."

We will look to it that this is the last season that the Kentucky show exhibits without license. If what the Weekly says be true, and there exists in Brooklyn, Cincinnati, or elsewhere, pariahs of this sort, will our brethren of the press post them properly, that the virtue of our medical youth may be protected?

The Louisville-Kentucky School holds two graduating courses in one year! Its commencements are at the frightful distance of four months and a half apart! It graduates students of medicine after nine months' course. At its last examination it rejected

one man! It graduated another (by mistake!) who had attended four days of its preliminary course. It presents each graduate with two diplomas, and until the Louisville Medical News brought it up standing it issued these diplomas signed by the faculty with the space for the candidate's name left blank! Under the head of a "Sample Libel" the Weekly prints this last assertion of ours, and then acknowledges that the school did issue the diplomas blank, but that the recipients might have them filled with "illuminated text"! We said nothing about what they wished them filled with. We simply asked what a man wanted with two diplomas, and hinted at the possibility that some black sheep (which may occasionally creep even into medicine) might embrace with text, illuminated or otherwise, some cognomen other than his own. We thought it wrong that temptation should be put in any man's way.

The Weekly wishes to know how "a student could be induced to sell a diploma which has cost him years to acquire, without which he can not practice, and which no college can duplicate." *Nine months* do not make "years," and whether a college can duplicate a diploma or not, the Louisville-Kentucky School starts each of its graduates with a couple of these documents. We venture to predict that there will be no more *blank* diplomas issued by the Louisville-Kentucky School, either with the flight of its

ORTOLANS OR BOB-O'-LINKS.

The Louisville - Kentucky School announces that it charges \$120 for its tickets, and despises cheap schools. This is to the profession; but a man might eat all the \$120 students that appear and never be called a cannibal. The school depends entirely upon "beneficiary" students. It offers one of these scholarships to every congressman, legislator, and school commissioner in the country to give away. There are several thousand of these. It gives them also to the sons of clergymen and doctors, of which two professions there are perhaps seventy-five thousand members in the coun-

try; and seeing the injustice of confining its benefits to such an oligarchy, it directs in its announcements that "any one who desires a beneficiary scholarship should apply to the dean as soon as possible." Moreover, the legislator to whom the scholarship is sent is asked to advertise over his official signature for some one to take it; and young men being misled by the name of the scholarship, and the assertion printed in it that it is given them because they are "pecuniarily disable" to obtain a medical education, accept it in the belief that it really means what it says. Coming to the school there is demanded of them a "beneficiary" fee of \$40, a dissecting fee of \$10, and a matriculation fee of \$5. These fees, with the *sale of private tickets* by the members of the faculty, make up the whole income of the school.

We have proved all these things; in fact, they are scarcely denied, and still it is "impudence and coarseness" on our part to mildly hint that the American Medical Association will take notice of these little irregularities and stamp this

INFLATION OF THE DIPLOMA MARKET

as unworthy of its members. We shall see, and we shall look to it that men who advertise over their "official signatures" for takers for these plausible documents shall know exactly what they are doing. We shall take care, too, that the "noble benefaction," which, in its stereotyped form, has appeared in so many journals of the country, shall be properly explained *in time* to the young men who think about seeking it. We owe it not only to the profession to attempt to stop this flood-gate, but to many honest young men who are being seduced by such plausible means to earn diplomas of which they can not in after life but be ashamed.

Such is our present showing. If any man still doubts that there exists in this country under the shadow of the American Medical Association such an institution as we have described, let him send for its circulars, and read further for himself about the monstrous sham.

NATURAL SELECTION.

The following are the forms for beneficiary scholarships issued by the Louisville-Kentucky School. They are sent to congressmen, members of the legislatures in every state, school commissioners, etc. "By the provisions of the Hippocratic oath" sons of clergymen and doctors are also entitled to them. While nothing is said in them about the payment of any money, a "beneficiary fee" of \$40, a matriculation fee of \$5, and a dissecting fee of \$10 is charged to all holders of these documents who wish to attend lectures at the Phenomenon. Private tickets of the professors (optional), \$5 to \$20 each. Sons of doctors and clergymen pay these beneficiary fees, etc., and before graduating are required to take the Hippocratic oath that they will charge the sons of their preceptors nothing for instruction.

LOUISVILLE MEDICAL COLLEGE.

LOUISVILLE, KY,, 1875.

To the Honorable, Representative from County:

DEAR SIR:—The enclosed certificate is herewith sent you. You will see that upon the receipt of this certificate, duly made out and signed by yourself as Representative of County, of the State of, that any poor and deserving young man selected by you from your county will be entitled to the Beneficiary Scholarship awarded by the Trustees of the Louisville Medical College (Louisville, Ky.) to County, of the State of

The officers of this College do you the justice to believe that you will, as early as possible after the receipt of this notification, endeavor to find in your county some young man who, through yourself, can be thus materially aided and benefited. *It is respectfully suggested that an inquiry, over your official signature, published in the nearest newspaper, will enable you to confer this benefaction both promptly and appropriately. Your earliest possible attention is respectfully asked.*

The Faculty request that in giving a certificate, you will use the enclosed blank form, which has been adopted and sent to you for reasons so necessary and prudential as to render any explanation superfluous.

It is particularly asked that the receipt of this communication be acknowledged, and that, through the undersigned, the Trustees and Faculty of the College be afforded the earliest possible information as to the name and address of the young man selected

by yourself for the Beneficiary Scholarship awarded to your county.

E. S. GAILLARD, M. D.,
Dean of the Faculty.

LOUISVILLE MEDICAL COLLEGE.

(LOUISVILLE, KY.)

Certificate.—Know all men by these presents, that the Trustees of this College having created, in perpetuity, one *Beneficiary Scholarship*, annually, for each County of the State of in behalf of one deserving young man *who is pecuniarily unable to obtain a medical education*, that I, the Representative of County, State of, do, in virtue of the power publicly conferred, select as a proper recipient of the *Beneficiary Scholarship* for said county

And that I do recommend him to the *Trustees and Faculty* of this College as, in all respects, worthy of the honor to be conferred upon him.

In Testimony Whereof, this *Official Certificate*, signed (as required) by myself, the Representative of County, State of, is hereby awarded to the said on this the day of in the year of our Lord one thousand eight hundred and seventy-five.

.....
Representative of County, State of

Original.

PARACENTESIS THORACIS.

TAKEN FROM THE NOTES OF DR. M. KEMPF BY

E. J. KEMPF.

In the spring of 1873 Mr. Duffy, aged twenty-five years, by occupation a bricklayer, came from Tell City to Ferdinand to place himself under my care. The following is a history of the case as reported to me by the patient's wife:

About six weeks before her husband suffered from an attack of acute pleuritis of the left side. The acute symptoms of the disease gradually disappeared, but his cough was still troublesome and his respiration became more difficult day by day. His breast was swollen for upward of four weeks. The present condition of the patient was truly pitiable; the dyspnoea was so great that he could not lie down for any length of time. He passed

sleepless nights, and his days were not much better. On examining the chest I was greatly surprised to feel the *apex-beat* of the heart under the *right nipple*. The left side of the chest was very much enlarged, and the intercostal spaces were bulged out. The respiratory murmur of the left lung was absent, or at least it was inaudible. Flatness existed over the entire extent of the left side of the thorax. Of course there was an effusion of an immense quantity of fluid in the left pleural sack. The trocar would reveal its character.

Suffering, restlessness, and disgust for all kinds of food had reduced the patient's strength and flesh very much. All palliative treatment having failed, I informed the patient's wife that only one remedy was left, and this offered but little chance of her husband's recovery in his present condition. Still there was a chance, and I advised her to get her husband's consent to be operated upon. Mr. D. gladly gave his consent. "Health or death" was his motto. Not having an aspirator, I prepared a common trocar, thus: A large bladder of a bullock was tied around the shield of the canula of a trocar. This answered the purpose quite well, and, assisted by Drs. Bindewald and Knapp, I performed paracentesis thoracis, thus: The patient being under the influence of chloroform, the skin between the sixth and seventh ribs near their angles was drawn upward; a small incision was made through the integument, and a trocar was inserted into this and pushed through the intercostal muscle into the pleural cavity. A straw-colored stream of serum soon filled the bullock's bladder; this was punctured at its lower end, to permit the serum to escape, being careful at the same time not to let any air into the thorax. The opening in the lower part of the bladder being again secured, the serum was again permitted to enter and fill it. In this manner I withdrew fully a gallon and a half of serum from the left chest. The patient, being incautiously raised, in order to permit all of the fluid to escape, became very faint, and I really

thought he would expire; but by the using of stimulants and the lowering of the head he speedily rallied. The integument formed a kind of valve over the wound, which was closed by adhesive strips.

Drs. Knapp and Bindewald and myself carefully examined the serum drawn from Mr. D.'s chest, and although we found it perfectly clear we still detected now and then floculi of matter-like substances in it. Still we had some hope of adhesion taking place between the left lung and the corresponding pleural sack. In this we were disappointed. Three days after the chest had been tapped the discharge from the affected side became purulent. The puncture therefore made by the trocar was enlarged to fully an inch in extent. I washed out the pleural cavity with a weak solution of carbolic acid, glycerine, and water, and after this I inserted a large slippery-elm tent. Twice a day the left pleural cavity was well washed out with the above-named solution with Madison's syringe. This syringing process and the insertion of the slippery-elm tent Dr. Bindewald or myself attended to every day for two weeks. By the use of stimulants, which were freely allowed and more freely taken, the patient taking a pint of Bourbon whisky daily, nutritious diet, muriate tincture of iron, and quinine, and with the use of anodynes when needed, the patient greatly improved, so that at the end of two weeks Mr. D. left for home in a fair way of getting well.

From September, 1874, to June, 1875, the case was under the charge of Dr. W. A. Bindewald, who reports: "I frequently saw Mr. Duffy at Tell City. He related that since the operation he felt tolerable well, but as yet unable to work; nor could he walk fast; it would cause cough and difficult breathing. He gained in weight and strength slowly; appetite generally good. I found on examination a small opening at the seat of operation about an inch in depth, from which a small quantity of pus would ooze during twenty-four hours. The left side of the thorax was considerably depressed. Aus-

cultation elicited a weak respiratory murmur, and at the lower lobe almost indistinct; percussion there rather dull, toward the apex more resonant. In October or November, 1874, he accepted a job of polishing marble slabs; he worked at it a few weeks, then quit on account that his work required him to dip his hands frequently into water, which often chilled him thoroughly. In the spring of 1875 he felt himself able to work at his trade, and did work laying brick for nearly two months. He remarked one day that his health was improving, but that he was not near so strong as formerly when working at his trade. He finally had a quarrel with 'the boss' on account of wages, and notwithstanding his opponent's pugilistic reputation Duffy succeeded in obtaining what he fought for. After that I lost sight of him."

DIAGNOSIS OF SPINAL DISEASE.

BY THOS. P. GRANT, M. D.

The difficulty of differential diagnosis in spinal disease in its earlier stages not unfrequently perplexes the most experienced practitioner. It is a common thing to hear persons, and sometimes even medical men, say there can be no disease of the spine, because there is no pain or tenderness along the spinal column. An absence of pain at the seat of the disease is so characteristic that Dr. Chas. F. Taylor, a practitioner of large experience in this and kindred diseases, says, "*There never is any pain in the back in spinal disease.*" But in point of fact both pain and tenderness have been found in some well-marked cases of Kyphosis. Both the rational and the physical symptoms of Pott's disease of the spine are so characteristic and generally so well marked as to enable a careful observer to detect them, and pronounce with almost unerring certainty upon the character of the disease, even the absence of angular curvature. Among the earliest rational symptoms is a listless, anxious expression of countenance, notable at first only at intervals and

generally after exercise or some sudden jar. As the disease progresses a sad, careworn, melancholy expression becomes habitual; the patient is quiet, lies or lounges around, and will not join in the sports of his companions, or does so for but short intervals, and complains of weariness and perhaps of headache, slight colic, or pain in the side or chest, or pain in the thighs. If a child, he will be inclined to lie across his mother's lap or a chair, or rest his elbows; and if the point of attack is in the cervical or upper dorsal vertebræ, will be inclined to rest his head on his hands. The digestion is usually impaired, the bowels irregular, and the urine charged with urates.

If the seat of disease is in the lower dorsal or lumbar vertebræ, the pain will be most felt in the hypogastric or iliac regions, and may be mistaken for *colic*. If it be in the cervical or upper dorsal vertebræ, there will be sharp intercostal pains.

The action of the heart is usually quick and irregular, and as the disease progresses becomes irritable. This disturbance, together with the characteristic intercostal pains, often cause an error in the diagnosis, and cardiac trouble of a serious character is apprehended. A half-suppressed sigh and an occasional catching of the breath during respiration may be often noticed. The sleep becomes uneasy and accompanied with more or less moaning.

Among the first physical symptoms the observing practitioner will notice is a great caution in moving about. Sometimes the toes are adducted and the knees bent. In picking up any object the patient will flex the knees and thighs rather than bend the back, taking care to steady himself with one hand. He walks with the head and shoulders thrown back or to one side in a stiff, awkward manner, and with a cat-like step.

The clothing being removed and the patient told to stand erect, there is generally more or less lateral curvature. This lateral curvature almost invariably precedes the angular curvature. The abdominal walls will usually be found to be relaxed, and the

adductor muscles of one or both thighs contracted. The patient will soon become fatigued in standing, and complains of pains in the sides or chest as above mentioned.

This state of case may continue for some time without any visible change, and then the disease run rapidly on, causing great constitutional prostration, carious destruction of the bone, generally a deformity, and sometimes paralysis and death.

Deformity usually appears some time after the lateral curvature as a slight projection of a single spinous process; this gradually enlarges, and an angular curvature is established unless relief is obtained. The symptoms are then so well marked that they can not be mistaken, unless the disease is situated in the cervical regions. Here the upper compensating curve is immediately above the point of disease, the head thrown back or to one side. The trapezii, the splenii, the sternocleidomastoid muscles, and the posterior and lateral muscles of the neck are drawn so tense that they cover or hide the angle in the spinal column, and thus render the diagnosis more difficult and the exact seat of disease obscure; but the same careful walk and disposition to rest the head will be observed, and sometimes a great difficulty in respiration and deglutition.

I call to mind a case brought to my father by Dr. D. W. Yandell, who was the first to diagnose to cervical curvature. This child was anæmic beyond belief, and apparently about to die of inanition, yet her respirations could at times be heard all over the house. In most cases of cervical curvature a partial or a total paralysis of the extremities rapidly supervenes, due to a pressure of the diseased bones on the contents of the spinal canal. This fact has been disputed, but I am unable to discover the slightest ground for a reasonable doubt.*

Among patients with cervical curvature I have seen one case of paralysis of the upper extremities and five cases of paralysis of the lower extremities, and three cases in which both upper and lower extremities were para-

lyzed. In each case the paralysis was relieved by relieving the pressure on the spinal cord. In some of these cases the paralysis was complete, extending even to the nerves of sensation.

These are some of the principal characteristic symptoms of Pott's disease of the spine. They are often slight, and are seldom all seen in any one case; but attention to these characteristics will aid the practitioner in a differential diagnosis of this disease, and enable him to seek proper remedies before great deformity has supervened; but I have known one case in which all the usual symptoms were wanting, or so slight as to escape observation, till after the disease had made considerable progress, and a projection as large as an egg had formed on the back, when the symptoms became acute and painful.

LOUISVILLE.

INDUCED LACTATION.

BY R. B. GILBERT, M. D.

Mrs. —, of this city, a married lady, but having no children, took an orphan child three weeks old to raise. She began feeding the infant on cow's milk, tea and crackers, etc., and, as is usually the case, the child soon got sick, and thus I was called in to prescribe. We found it with a slight diarrhea, and somewhat emaciated, and continually crying; indeed the crying was almost incessant, which was quieted only by repeated doses of paregoric. Our prognosis was of course unfavorable, for statistics show that three fourths of the "spoon-fed" children die before completing the first year. Therefore the plan of treatment for our case was to procure the natural food—that is, a wet nurse; for we attributed the crying and diarrhea to two causes—viz., loss of its mother and the character of the food; and thus to furnish a wet nurse would meet both indications. After diligent search a wet nurse could not be found. We then recommended the "next best thing," and that was for Mrs. — to suckle the baby herself! She was shocked at the suggestion at first;

*Vide Gross, Vol. II, page 202.

but after assuring her that I thought it could be done, and citing other similar cases as reported by Dr. Gilfillan of Brooklyn, and remarking upon her great love for the infant and its dependence upon her for life, she came to look upon it as a Christian duty to nurse the child and suckle it if possible. Moreover, she was anxious to become a mother, but had despaired of becoming one naturally, having been married five years; she the more readily undertook the experiment. We allude to these matters because we consider the mental influence of greatest importance in the secretion of milk, and think our treatment very favorably influenced by having cultivated a *desire* in that direction.

We directed her on retiring at night not to give the accustomed opiate, but let it take hold of the breasts, which were well developed. The child took hold with avidity, and after sucking nearly an hour at the dry breast it went to sleep and slept nearly all night. The following day we caused a large poultice of the green leaves of the *ricinus communis* (castor-oil plant) to be applied, and at the same time giving tea-spoonful doses of castor oil internally every three hours. At the end of the first twenty-four hours she experienced a peculiar sensation in the breasts, and in three days the flow of milk was well established. It is needless to add that the infant speedily recovered, and the adopted mother experienced great satisfaction.

LOUISVILLE.

Selections.

LETTER FROM BERLIN.—The Boston Medical and Surgical Journal of February 17, 1876, publishes the following interesting letter from Berlin: "The question used to occur to me, as I presume it does to many an American medical student, why so many Americans go abroad to study, while we have so large and so rich medical schools at home. So far as 'studying abroad' is concerned, it is not certainly without many disadvantages. To learn a new language, a new medical vocabulary, new standpoints of treatment;

to acquire the habits of a European people; to forget the luxuries of a practical American life; such are some of the obstacles to successful study. One must, however, look at the distribution of American students to determine their purpose in selecting a foreign university. It is not the medical undergraduate who is abroad; such are exceptions. It is either the young graduate who seeks a specialty before undertaking general practice, or the practitioner who after a few years of work at home wishes to improve himself in his specialty, or to pursue the never-ending investigations which pertain to the fundamental studies of physiology, pathology, and physics, for which the German universities, *par excellence*, are so justly celebrated. I firmly believe that an undergraduate can do better at home, certainly as to clinics and the opportunity of seeing dexterous operations. In the old Friedrich-Wilhelms Universität of Berlin there are matriculated in this winter semester, from November to April, 2,143 students, of whom 263 are regular students in medicine. This number does not include 2,000 more, who are distributed in the schools of mining, agriculture, art, etc. I am unable to give the number of American medical students, but of the 4,100 there are 62 from America, of whom seven eighths are from the United States, while all Great Britain sends only 12. This gross difference may be accounted for by the fact that the universities of Great Britain are well prepared to receive students who seek a higher education. It is, however, by no means true that one may receive the best instruction in a large town. Much is to be learned at smaller universities, as those of Halle, Leipzig, Würzburg, of Germany; Zurich, of Switzerland; and Utrecht, of Holland. One may naturally infer from the system of instruction that a result obtains here which does not accrue to an American medical school. The audiences are small and are distributed all over the town, where the different branches of instruction are given. There are sixty-six professors and instructors in the medical department alone, giving an average of four students to a teacher. Du Bois Raymond in physiology, Virchow in pathology, and Langenbeck in the surgical clinique probably command the largest medical audiences. The experience of the American student on coming to Berlin is universally peculiar. Arriving here with the full purpose of hearing the 'opening lecture,' he starts out bright and early on the morning of October 16th, as directed in the official circular, to listen to Professor Virchow; but he is confronted with the half-Latin, half-German announcement on the bulletin board that Virchow will first read on November 7th, hour not stated. Retracing his steps through the immense grounds and the long halls of the Charité, a hospital whose full outfit of beds in all departments aggregates seventeen hundred, he tries Prof. Frerich's medical clinical theater,

and finds himself put off to November 5th, two days better. Punctually at two o'clock P.M. he walks over to the Jewish end of the 'medical quarter' of the town to see Baron Langenbeck's first public surgical clinique; but here again is he disappointed; he looks upon an old-fashioned, dangerously steep amphitheater of one hundred and twenty seats, and slowly translates the announcement that Prof. Langenbeck will first operate in three weeks or so. Such is the story. However, a few days of search and of Yankee inquiry, and of study of the official circular, will acquaint him with several small special clinics which he can visit daily, and where he is as welcome as at any similar institution at home. It is, I am told, peculiar to this university, the method of having these so popularly known 'universität-kliniken' in every quarter of the town. Naturally the vicinity of the Charité, known as the 'medical quarter,' contains the largest number. One can hardly walk five minutes here without seeing in a parterre or second flight the announcement of a royal university clinique for special diseases. On comparing the location with his official circular he finds that this uninviting, dingy, brown building is the location of Professor Schweigger's eye clinique, Schweigger having been for so many years Graefe's first assistant, and now his successor to the university professorship; and that larger but equally ancient-looking structure in a side street is Lucae's ear clinique, where also, in another part of the building, is Langenbeck's daily surgical clinique. A custom prevails here whereby clinical instruction is made exceedingly profitable; it obtains chiefly with the privat-docents, or official instructors. They hold once or twice a week a free public clinique, open to all students. As a rule, it is held in their private offices, and some of them fall on Sunday morning. It is usually confined to special instruction, and the audiences are small; full opportunity to see and to ask questions is afforded, and the student who can appreciate can not but profit by the opportunity. Yankee inquiry alone explained to me the arrangement, peculiar to Germany, I believe, and one which is not popular at home, so far as I know. The instructor who presents the largest number of names of students is, *ceteris paribus*, entitled to first consideration when the selection of a new professor is to be made. This does not apply to clinics alone. For instance, Dr. Tobold is not yet a professor; in his capacity as instructor he gives a course on laryngoscopy, one hour a week, clinical or didactic, throughout the whole semester; so, too, Fraenkel on laryngoscopy and rhinoscopy, Hirschberg and Schoeler on the eye, Weber-Liel on the ear, etc. These are free to matriculated students. Every such instructor has in addition a private course, at an average price of five dollars, consisting of from ten to fifteen hours. It will readily occur to those of your readers who

have studied in Berlin what their impression is of these courses by the instructors. My own opinion is that one can learn much more from them than from the professors. In Vienna the arrangement is somewhat different. The courses are of eight weeks' duration, and are so arranged that the student can pursue allied branches together, thus working with more rapidity. Whether the plan produces better results I am not prepared to say. It is the general impression with foreigners that Vienna is the city to visit for special medical study, a statement which in so broad a view will hardly have corroboration. Before one makes a start for a German university, let him satisfy himself as to what he wants to do; then acting upon advice at home or in London or in Paris, he should go directly to the destination intended, whether it be Vienna, Berlin, Leipzig, or Prague. The courses change but little from year to year as to time. Of one point I am satisfied: a student can find enough to do in Berlin, and the town itself is more conducive to study than Vienna. Naturally the German is better; but, allow me to add, one must forget Hanover or Brunswick or Magdeburg in alluding to Berlin German. Lastly, the theaters are good and not expensive, to the best of which the matriculated student has the *entrée* at half price. A provision in the will of Von Graefe fell under my eye the other day, which is of peculiar interest. It was that his immense eye clinique at the end of Karlstrasse, in which Dr. Richard H. Derby, of New York, was an assistant at the time of Graefe's death, be abandoned. The request was complied with, and there is now an ordinary *destillation*, or liquor shop, upon its site. The result is that as one stands on the corner of Karlstrasse and Louisenstrasse one may see no less than five eye clinics, conducted under the auspices of the assistants of the renowned oculist. There are thirteen eye clinics in the town, but these five are the direct result of Von Graefe's work in that part of Berlin. His clinical armamentarium is to be seen daily, still in use by his assistants, and it would be strange if some of it had not gone to America. My letter has been chiefly upon the opportunities of medical study in the university at Berlin. The intention was, if possible, to assist students who contemplate devoting any time to study in Germany. While Virchow, Helmholtz, Langenbeck, and Du Bois Raymond are beacon-lights attracting medical students to Berlin, it must be remembered that minutiae are learned more from assistants and by private instruction and hard personal application than directly out of the mouths of these men. Even an American can hardly afford the money, and certainly not the time, to attain merely the distinction of possessing the signature of these men. A word about Virchow, and I will close. All in all, he is one of the most remarkable medical men I ever knew. His personnel is by no means striking.

He is below the average German stature, of a dingy complexion, and with an impassioned expression; one fails to detect the depth of his researches in science or the strong will or the cutting sarcasm which characterize him. An hour in the Pathologisches Institut easily demonstrates his accurate study in that part of medical science to which he has devoted the most hours of the best part of his eventful life. His political tenets, at variance with those of the chancellor of the empire, and in sympathy with that large radical party of Germany whose ideal may be seen in nearly every European government of today, call it by whatever name you please, liberalism, radicalism, or conservatism, have developed an iron will and a bitter sarcasm which make him a species of terror to the government. In other ways is he remarkable. Always late at his lecture, and appearing now but twice a week, he has time enough apparently for the numerous demands made upon him. On the same day he is to be seen from nine to eleven A. M. in the Pathologisches Institut demonstrating, with a vast array of material, cellular pathology; and from five to seven or eight P. M. in the Chamber of Deputies of Prussia, of which this week he was elected vice-president over the nomination of his predecessor; later, hard at work in the Royal Geographical Society. Besides these official appointments he is chief editor of a popular journal of science, contributes occasionally an article to scientific bodies, and gives popular lectures in the winter. I have alluded to his life as an eventful one. It may not be generally known on our side of the water that in the revolution of 1848 he fought as a common soldier behind the trenches; that he was forced to abandon his professorship here on account of his political doctrines; and that he went to Würzburg, where the book of his life—the exposition of the cellular pathology—was written; that the government was obliged to recall him to his department in the university on account of the urgent demand of scientific men, who recognized his worth by the new book; that later Prince Bismarck challenged him to a duel, whose acceptance he had the courage to refuse. These and many other events of his life make Rudolph Virchow one of the most conspicuous men of the day in Germany. I am told that he regrets the comment not long ago made about him, that he was a severe critic as to the merits of other men. Virchow is poor, lives on the second flight, and complains that he can not live as a gentleman of his standing should."

CATHETER REMOVED FROM THE BLADDER.—Dr. Stimson, before the New York Pathological Society (Philadelphia Med. and Surg. Reporter), presented the fragments of a flexible catheter which had been removed from the bladder of a man by the lithotrite. A middle-aged German received an injury of his back

fourteen years ago, which was followed by paralysis of the lower extremities and rectum; he was obliged to draw off his urine by means of a catheter. Six weeks ago he was run over by a wagon, the wheels passing over his loins; the result was an aggravation of the bladder symptoms. Shortly after the occurrence of this accident he bought a few cheap catheters at a country drug shop. He introduced one of them into his urethra, and broke it, eight inches remaining in situ, which by further manipulation was partly pushed into the bladder. He presented himself at Dr. Willard Parker's office with his penis very much swollen and insensible. He had tied the prepuce with a string. Dr. Parker removed a portion of the catheter by means of the lithotrite. Eight days later Dr. Stimson removed the remaining fragments in the same manner. No cystitis followed these operations. After the first one the patient could retain his urine for six hours, and after the second operation he could retain it for as long a period as before the occurrence of the accident. While the catheter was in the bladder the patient could retain about an ounce and a half of urine. If more was allowed to accumulate it would dribble away.

Miscellany.

MEDICAL COLLEGE COMMENCEMENTS IN LOUISVILLE.

The commencement exercises of the several medical colleges in the city were held at Public Library Hall. The audiences upon the several occasions were as usual quite large. In the aggregate two hundred and thirty-two doctors were made. Louisville is now, we believe, the third medical center in the Union. Our space forbids more than a synopsis of the events.

LOUISVILLE MEDICAL COLLEGE.

The seventh annual commencement of this college took place upon the evening of the 26th of February. The graduating class number eighty-six. The exercises consisted in prayer, by the Rev. J. Gordon Curnachan, of Pennsylvania; class salutatory, by Dr. J. A. Waggener, of Kentucky; address by General William Preston, President of Board of Trustees; conferring degrees and prizes and administration of Hippocratic oath; class valedictory, by Dr. J. Irvin Keller, of Kentucky; faculty valedictory, by Prof. C. W. Wright—subject, "Mind and Brain."

The prizemen were R. T. Dempster, of Canada, first honor, a gold medal; Jas. R. Buchanan, of Kentucky, best thesis, a silver medal; J. L. Goree, of Arkansas, and W. H. Lancaster, of Texas, Professor Keller's surgical prize; J. L. Goree, Prof. Wright's

chemical prize; J. L. Goree, J. R. Buchanan, of Kentucky, and J. Q. Orvis, of Iowa, equal prizes from Prof. Gaillard, silver medals; R. T. Dempster, of Canada, and J. Q. Orvis, Prof. Kelly's anatomy prize; J. Irvin Keller, of Kentucky, Markham & Byington's prize on hypodermic medication; J. L. Goree, Prof. Ochterlony's materia medica prize—honorable mention, J. Q. Orvis; T. M. Wright, of Ohio (first course), Prof. Ochterlony's clinical lecture prize; J. T. Woods, of Arkansas (first course), Prof. Cook's prize; T. M. Wright (first course), Professor Keller's prize.

LOUISVILLE HOSPITAL COLLEGE.

The second annual commencement of this college took place on the evening of February 28. The exercises consisted in prayer, by the Rev. Fleming James; class salutatory, by P. P. Truehart, of Kentucky; class valedictory, by T. J. Croppard, of Mississippi; address, by Dr. Larrabee; faculty valedictory, by Prof. E. D. Forée—subject, "The Centennial of Medicine;" conferring degrees and prizes, by Rev. R. L. Breck, D. D., chancellor of Central University; benediction, by Rev. W. J. Lowry.

The following is a list of the prizes given:

Curator's gold medal for best general standing in all the branches, awarded to J. S. Coleman and Douglass Howard, of Kentucky. The faculty gold medal for the best anatomical preparation, awarded to Jas. A. Lynch, of Kentucky, a first-course student. A pocket case of instruments for the best record of surgical clinic, awarded to L. W. Gilland, of Mississippi. Prize offered by Prof. Holloway for the best standing in surgery, awarded to J. S. Coleman, of Kentucky. A pocket case of instruments for the best notes of the lectures of Prof. Speed, offered by Simon N. Jones, awarded to Boyd Cormick, of Tennessee, a first-course student. A pocket case of instruments, the prize offered by Bennett H. Young, Esq., for the best notes of the clinical lectures of Prof. Wilson, awarded to E. M. Gober, of Kentucky. A gold medal, offered by Cook & Sloss for the best notes on the clinical lectures of Professor Reynolds, awarded to Douglass Howard, of Kentucky; honorable mention is made of the notes of F. R. Ramsdel, of Texas. A gold medal, offered by Prof. Larrabee for the best notes of his clinical lectures upon the diseases of children, awarded to W. H. Coffman, of Georgetown, Ky. The gold medal offered by Mrs. Pyles, as a memorial of Dr. Mat. Pyles, for the best thesis on erysipelas, was awarded to Dr. A. G. Pendleton, of Tennessee. The two prize scholarships for the best general standing as first-course students were awarded to Boyd Cormick, of Tennessee, and Mr. Barnard, of Mississippi.

UNIVERSITY OF LOUISVILLE.

The thirty-ninth annual commencement exercises of this university took place on the afternoon of

March 1. The medical and law graduates for the first time received their degrees upon the same occasion. There were one hundred and twelve graduates in medicine and fifteen in law. The exercises consisted in prayer, by the Right. Rev. Thos. U. Dudley, jr., Bishop of Kentucky; law class salutatory, by W. G. Pendleton, of Missouri; medical class valedictory, by Dr. S. T. McDermit, of Illinois; law class valedictory, by Benjamin R. Haggard, Esq., Kentucky; law faculty valedictory, by Hon. James Speed—subject, "Custom"; medical faculty valedictory, by Prof. R. O. Cowling—subject, "The Relations of Medicine to Modern Unbelief"; conferring degrees and prizes by Hon. Isaac Caldwell, President of the Board of Trustees.

The following was the award of prizes:

First—The gold medal offered by the trustees of the University of Louisville to the student showing "the highest excellence in all the branches of science taught in the Medical Department of the University," is awarded, by the unanimous vote of the faculty, to James H. O'Reilly, M. D., of Louisville, Ky.

Second—The silver medal offered by the faculty of the Medical Department to the student standing next to the highest in excellence in the general examination for graduation, is awarded, by the unanimous vote of the faculty, to Harrison Bell Kurtz, M. D., of Hardin County, Ky. And, by the vote of the faculty, to Doctors R. C. Harris, of Tennessee; R. S. Stanley and Bailey Caldwell, of Mississippi; O. I. Halbert, of Texas; C. D. Arnold, of Kentucky; and T. H. Terry, of Louisiana, honorable mention is awarded in this competition.

Third—The gold medal offered as a prize by Prof. Bodine to the member of the class who should pass the best examination in anatomy, is awarded to James H. O'Reilly, M. D., of Louisville, Ky. G. W. Ryan, of Louisville, Ky., and B. Saunders, of Texas, first-course students, richly merit honorable mention in this competition.

Fourth—A pocket case of instruments, offered by Simon N. Jones, of "the Pharmacy," as a prize to the student standing second in the examination in anatomy, is awarded to Harrison Bell Kurtz, M. D., of Hardin County, Ky.

Fifth—The gold medal offered by Prof. L. P. Yandell, jr., as a prize for the best book of notes of his lectures on therapeutics, is awarded to William H. Merry, M. D., of England.

Sixth—The gold medal offered by Prof. Palmer to the member of the class who should pass the best examination in physiology, is awarded to James H. O'Reilly, M. D., of Louisville, Ky. Doctors O. I. Halbert, of Texas, and B. B. Cracy, of Tennessee, deserve honorable mention for their merits in this examination.

Seventh—The gold medal offered by Prof. Bell to

the member of the class who should pass the best written examination "on all the phases involved in the production of malaria, with illustrative facts, and the chief diseases and range of diseases produced by that poison," is awarded to James H. O'Reilly, M. D., of Louisville, Ky. This prize produced an able and spirited contest. Doctors W. A. Jamison, R. W. Duncan, and T. Crigler, of Kentucky, and F. M. Faught, M. D., deserve honorable mention for excellence in this examination.

Eighth—Professor Bell awards to J. E. Renner, of Grefswald, Germany, a first-course student, a copy of Segwin's great work on "Medical Thermometry and Human Temperature," as a testimonial to the signal merits of the effort of Mr. Renner in this competitive examination.

Ninth and Tenth—The gold medal offered by Professor Crowe to the member of the class who should pass the best examination in "Obstetrics and Diseases of Women," produced a competition so equal in merit between Doctors O. I. Halbert, of Texas, and James H. O'Reilly, of Louisville, Ky., that it was impossible to decide between the two contestants. This prize is duplicated, and Prof. Crowe awards a gold medal to each of the two contestants, O. I. Halbert, M. D., of Texas, and James H. O'Reilly, of Louisville, Ky. Of the seventeen contestants for this prize, Doctors W. A. Jamison and H. B. Kurtz, of Kentucky, and F. M. Faught, of Tennessee, won honorable mention.

Eleventh—The gold medal announced as a prize to the member of the class who should pass the best examination in "Materia Medica and Medical Chemistry," is awarded to F. M. Faught, M. D., of Tennessee. Doctors J. C. Harris, of Tennessee, and James H. O'Reilly, of Louisville, Ky., deserve honorable mention in their competition for this prize.

Twelfth—The prize, a pocket case of instruments, offered by Messrs. Arthur Peter & Co., wholesale druggists, of this city, to the member of the class who should pass "the best examination in operative surgery upon the cadaver," is awarded by Professor Cowling to Thomas H. Terry, M. D., of Louisiana. Honorable mention of Dr. William Griffiths, of Louisville.

Thirteenth—A prize, a new edition of "A Manual of General Pathology," by Ernst Wagner, M. D., the great teacher in the University of Leipzig, offered by J. P. Morton & Co., publishers and booksellers, of this city, is awarded to O. I. Halbert, M. D., of Texas, for faithful attendance and general excellence.

Fourteenth—The pocket case of instruments offered by Mr. Simon N. Jones, of "the Pharmacy," as a prize to the student producing the best notes of Prof. Cowling's lectures upon Surgical Pathology and Operative Surgery, has been awarded to H. P. Cox, of Kentucky.

Fifteenth—Prof. Cowling awards a gold medal to W. H. Merry, M. D., of England, for notes on lectures on Operative Surgery on the Cadaver.

Sixteenth—The prize offered by Mr. Simon N. Jones to the student of Dr. Roberts's class standing the best examination in operative surgery, is awarded to Thomas H. Terry, M. D., of Louisiana.

—The British Medical Journal gives, as evidence of the frequently erroneous application of the argument *post hoc propter hoc*, some ward notes of the impressions which patients occasionally derive from the use of the clinical thermometer. A young woman who was convalescent, and whose temperature had long remained normal, had a slight relapse, which she attributed to having had "no glass under her arm for a week." A man suffering from acute rheumatism obstinately refused to have his temperature taken any more, saying, "It took too much out of him; it was drawing all his strength away." A sister in one of the women's wards says that many of the patients think the thermometers are used to detect breaches of the rule against having unauthorized edibles brought in by friends.

THE WINTER OF 1875-76.—The winter just gone will be long memorable for its mildness. As illustrative of its character the following incident is worthy of record: A farmer in Grayson County, Ky., observing the track made by some animal in the mouth of a sink-hole, set a trap to catch it early in February. Visiting his trap a day or two afterward he was surprised to find in it a large rattlesnake, that had been passing all winter in and out of his hibernaculum.

AVERAGE OF LIFE.—The yearly mortality of the globe is 42,403,000 persons. That is at the rate of 115,200 per day, 4,800 per hour, 80 per minute. Among 10,000 persons one arrives at the age of one hundred; one in 500 attains the age of eighty; one in 100 to the age of seventy. In 100 persons 95 marry.

—Some one has written for an "annular centennular circular." He should apply to one of the Philadelphia schools.